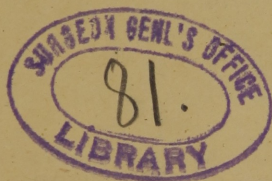
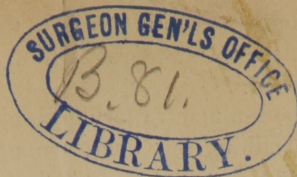


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A Case of sub-mucous
uterine fibroid





A CASE OF SUB-MUCOUS UTERINE FIBROID TREATED BY ELECTROLYSIS.¹

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NOVEMBER 15, 1876, I was consulted by Mrs. S., aged forty-five, a native of Maine, but a resident of California, for an obscure abdominal tumor. Her mother died of cancer of the breast, and a sister after an operation for the removal of a fibrous tumor of the uterus which had undergone partial spontaneous enucleation. The patient was a decided blonde, above the average stature, with fair nutrition. Menstruation was established at seventeen, and continued normal. She was married at twenty-two, gave birth twice, the first time a year after marriage, the last three years later, twenty-one years ago. There were no miscarriages. Menstruation continued regularly for the next twelve years. Six years previous to consulting me, a day or two prior to a usual period, her attention was accidentally directed to a growth in the right ovarian region. The tumor slowly but steadily increased in size, but for four years the general health, as well as the menstrual function, was unaffected by its presence. During the last two years a decided influence on the catamenia has been apparent. At each period there was a marked increase in the quantity of the flow and a lengthening of the duration of the function. Lasting when she was in health from three to five days, it was now prolonged to ten, twelve, and at times fifteen days, and attended by severe expulsive pains and coagula. The past year all the above-mentioned irregularities and complications have steadily increased, together with severe gastric irritation and a condition of general depression amounting well-nigh to coma.

By palpation I found the abdomen covered by a dense layer of adipose tissue; at the right of the median line, arising from within the pelvis and extending above the umbilicus, a smooth spherical tumor the size of the foetal head, apparently without adhesions. Vaginal exploration and bimanual palpation showed a well-defined growth arising from the right and upper part of the uterus, extending downward toward

¹ Read before the Obstetrical Society of Boston, May 11, 1878.

the cervical portion of the organ. The sound passed nine inches. By rotating the tumor presenting above the pubes with the sound in the uterine cavity, the intimate relation of the tumor with the uterus was clearly established.

Diagnosis: sub-mucous uterine fibroid.

Before entertaining any operative procedure, in view of the menorrhagia, I suggested a trial of ergot hypodermically administered. The lateness of the season necessitated an early return to California. I was therefore obliged to postpone the treatment for the time. The journey, undertaken the next week, was attended with great discomfort, which aggravated all the symptoms at the next menstrual term. Early in January, 1877, she wrote me a most doleful letter; her sufferings at each menstrual period the entire winter had been so intense that life had become a burden. She had determined, therefore, as soon as the season would permit, to proceed East prepared for any operation which would offer the slightest hope of relief. A month later I saw her, three days after her arrival in Boston. The journey from her home to San Francisco, some sixty miles by stage, and the remainder of the route, requiring in all ten days of the most tedious travel, exhausted her greatly. While passing under the snow sheds, though well protected, she experienced a severe chill. I suggested giving the patient ample time to recuperate fully from the long and wearisome trip before commencing the proposed treatment. On the sixth day after her arrival marked symptoms of phlebitis appeared in the left leg. The inflammation continued with varying intensity, confining the patient to the bed for eleven weeks.

All the symptoms having then subsided, I deemed it safe to begin the ergot treatment. Accordingly, I injected into the cellular tissue in the vicinity of the abdominal portion of the tumor fifteen minims of a solution of Squibb's aqueous extract of ergot, each minim containing a grain of the drug.¹ No result followed the first application. The next night fifteen grains of the same form of ergot were employed by rectal suppository, and repeated on the following evening. Four hours after the last application the most violent uterine contractions ensued, and continued at intervals of ten or fifteen minutes for twenty-four hours. The patient became so exhausted from the wear and tear of the pains and the loss of sleep that I was forced to counteract the effects of the ergot by large doses of opium by the rectum.

At the patient's fervent solicitation this method of treatment was abandoned, for a time at least.

September 7th, the case was carefully examined under ether by Drs. Kimball, Wheeler, Chadwick, and myself. The greater facility afforded by the anæsthesia convinced us that any surgical interference was not

¹ As prepared for me by my druggist, Mr. Edward Kelly, of Boston.

to be thought of, Drs. Kimball and Wheeler earnestly recommending the trial of electrolysis.

September 25th, four days after the cessation of the following menstruation, without any previous preparation, the patient being profoundly etherized, in the presence and with the assistance of Drs. Wheeler, Webber, and Cutter the electrolysis was performed as follows: I introduced one electrode into the segment of the tumor presenting in Douglas's cul-de-sac (the needle entering three inches), the other pole being applied to the surface of the abdomen immediately above the tumor. Dr. Webber allowed the current from fifteen and later from eighteen cells of a constant battery to pass through the substance of the tumor for ten minutes. The pulse, which was seventy and full before the ether, fell to sixty at the end of five minutes, and to fifty at the close of the application. Complete recovery from anæsthesia took place five hours later, the pulse continuing slow and feeble.

September 26th, A. M. A quiet night; urine voided voluntarily; pulse 55; the abdomen somewhat tympanitic and sensitive on pressure. Brandy and water was ordered to be taken half hourly.

September 26th, P. M. Pulse 60; nourishment taken and retained.

September 27th. Reaction fully established; pulse 70; slight tenderness over the abdomen; nourishment taken freely.

From this time on there was little of interest to note from day to day, convalescence proceeding without interruption, the patient resuming her ordinary duties on the eighth day. Menstruation recurred October 25th, thirty days after the operation, with an interval of thirty-six days; was painless, free from coagula, and of five days' duration. The second menstruation appeared February 14, 1878, continued five days, was painless, and without coagula. The interval was one hundred and eleven days. The third menstruation began March 17th, with twenty-six days interval. The day previous to the event the patient spent several hours in active exercise over an intensely hot fire. The flow continued ten days, but without complication. A marked improvement, general and local, dated unquestionably from a week subsequent to the operation, and has continued without interruption.

April 16th. The patient considers herself in perfect health, walking and driving without discomfort, having added fifteen pounds to her weight. A careful examination of the tumor showed its upper margin to be two inches below the umbilicus; by actual measurement in all dimensions markedly diminished; the sound passed seven inches instead of nine before the electrolysis.

April 26th. Twenty days after the cessation of the catamenia she ventured to start for home. A note received subsequently to her arrival informs me that after quite a jar from shackling of the cars at Detroit the catamenia appeared, the interval being thirty days. She was con-

siderably alarmed, and anticipated trouble. On the contrary, however, the function, though somewhat profuse, continued without the slightest discomfort during the rest of the journey. In her note she adds: "I have not felt a pain since I left Boston, and with the exception of slight colds I have never been in better health."

